

**Application Data Sheet****Application Information**

Application Type:: Regular  
Subject Matter:: Utility  
Suggested Classification::  
Suggested Group Art Unit::  
CD-ROM or CD-R?:: None  
Number of CD Disks::  
Number of Copies of CDs::  
Sequence Submission?:: Paper  
Computer Readable Form (CRF)?:: No  
Number of copies of CRF::  
Title:: IMMUNIZING COMPOSITION AND  
METHOD FOR INDUCING AN IMMUNE  
RESPONSE AGAINST THE BETA-  
SECRETASE CLEAVAGE SITE OF  
AMYLOID PRECURSOR PROTEIN  
SOLOMON6A  
Attorney Docket Number:: SOLOMON6A  
Request for Early Publication?:: No  
Request for Non-Publication?:: No  
Suggested Drawing Figure::  
Total Drawing Sheets:: 10  
Small Entity?:: Yes  
Latin Name::  
Variety Denomination Name::  
Petition Included:: No  
Petition Type::  
Licensed US Govt. Agency::  
Contract or Grant Numbers::  
Secrecy Order in Parent Appl.?:: No

**Applicant Information**

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Israel  
Status:: Full Capacity  
Given Name:: Beka  
Middle Name::  
Family Name:: Solomon  
Name Suffix::  
City of Residence:: Herzlia Pituach  
State or Province of Residence::  
Country of Residence:: Israel  
Street of Mailing Address:: 120 Hanassi  
City of Mailing Address:: Herzlia Pituach  
State or Province of Mailing Address::  
Country of Mailing Address:: Israel  
Postal or Zip Code of Mailing Address:: 46399

**Correspondence Information**

Correspondence Customer Number:: 001444

**Representative Information**

Representative Customer Number:: 001444

**Domestic Priority Information**

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/US03/006388	03-04-03
PCT/US03/006388	Appln claiming benefit of 35 USC 119(e)	60/361,344	03-05-02

**Foreign Priority Information**

Country:: Application Number:: Filing Date:: Priority Claimed::

**Assignment Information**

Assignee Name:: Ramot At Tel-Aviv University LTD.  
Street of Mailing Address:: P.O. Box 39296  
City of Mailing Address:: Tel-Aviv

**State or Province of Mailing Address::**

**Country of Mailing Address::** Israel

**Postal or Zip Code of Mailing Address::** 61392